Only

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FEC FORM 1			RGAN									O#:		.			•
NAME OF COMMITTEE (in	full)	,	Check if name changed)		ample:If t		уре	[:	2F	E4M		JIIICE	Use O	niy			_
George Ho							1 1										Ш
										1 1							Ш
ADDRESS (number a	nd street)	PO Box 9	7187														Ш
(Check if a is changed	address d)																Ш
	,	Raleigh	TY A					9	NC STATE		27	7624 	Z	- :IP C	ODE	<u> </u>	Ш
COMMITTEE'S E-MA	AIL ADDRE	SS															
(Check if a is changed		GHC@	cmandco.co	om 													
		Optional	Second E-Mai	l Address			1 1									1	. 1
COMMITTEE'S WEB (Check if a is changed)	address		RL) rgeholdingforco	ngress.com													
2. DATE 0.			y y y 2019														
3. FEC IDENTIFIC	CATION NU	JMBER ▶	С	C004992	36												
4. IS THIS STATEM	MENT X	NEW	(N) OF	R [AM	IENDE	O (A)										
I certify that I have e	examined th	is Stateme	nt and to the	best of my	knowled	ge and	belief	it is t	rue,	corre	ct an	ıd coı	mplet	e.			
Type or Print Name	of Treasure	- McMicha	el, Collin, , ,														
Signature of Treasure	er <i>McMi</i> 	chael, Collin,	,,		[Electron	iically F	iled]	Da	te	M (M 04	/ D	15			119	Y
NOTE: Submission of			omplete informa GE IN INFORI	-								e pen	alties	of 2	U.S.C	. §43	- - 17g.
Office Use					For furti Federal Toll Free	Election (Commis		ct:					-OR d 06/2	RM 1 2012)	1	_

Local 202-694-1100

FI	EC Fo	orm 1 (Revised 02/2009)	Page 2
		COMMITTEE	
	ildate x	Committee:	
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)	
(b) Name	of	This committee is an authorized committee, and is NOT a principal campaign committee. (Completinformation below.) Holding, George, E, Mr.,	ete the candidate
Candid	date	Trotaing, George, E, Wir.,	
Candio Party		ion REP Office Sought: X House Senate President	State NC
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
Name Candid			
Party	/ Con	mmittee:	
(d)		· · · · · · · · · · · · · · · · · · ·	emocratic, epublican, etc.) Party.
Politi	ical A	Action Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	cted organization is a
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segrecommittee. (i.e., nonconnected committee)	egated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint	Func	draising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
	Com	nmittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

FEC Form 1 (Revised	02/2009)	Page 3
Write or Type Committee Nam	e	
George Holding	g for Congress Inc.	
	Organization, Affiliated Committee, Joint Fundraising Representative, o	r Leadership PAC Sponsor
THE HOLDING VICTO	ORY FUND	
Mailing Address	PO BOX 97275	
, and the second	RALEIGH NC CITY STATE	27624 ZIP CODE
Relationship: Connecte	ed Organization Affiliated Committee X Joint Fundraising Representation	ve Leadership PAC Sponsor
Custodian of Records: Ide books and records.	ntify by name, address (phone number optional) and position of the per-	son in possession of committee
	el, Collin, , ,	
Full Name	PO Box 97275	
Mailing Address		
	Raleigh	27624
Title or Position	CITY STATE	ZIP CODE
Custodian	91: Telephone number	9 324 6606
. Treasurer: List the name ar any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; a assistant treasurer).	and the name and address of
Full Name McMichae of Treasurer	el, Collin, , ,	
Mailing Address	PO Box 97275	
	Raleigh NC STATE	ZIP CODE
Title or Position Treasurer	919 Telephone number	

	rm 1 (Revised 02/2009)	Page 4
Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
safety deposit b	poxes or maintains funds.	
Name of Bank,	Depository, etc. First Citizens Bank 19650 Falls Of Neuse Rd	
	Depository, etc. First Citizens Bank 19650 Falls Of Neuse Rd	
Name of Bank,	Depository, etc. First Citizens Bank 19650 Falls Of Neuse Rd	
Name of Bank,	Depository, etc. First Citizens Bank 9650 Falls Of Neuse Rd	ZIP CODE
Name of Bank, Mailing Address	Depository, etc. First Citizens Bank 9650 Falls Of Neuse Rd Raleigh NC 27615	
Name of Bank, Mailing Address	Depository, etc. First Citizens Bank 9650 Falls Of Neuse Rd Raleigh CITY STATE Depository, etc. BB&T 6659 Falls of Neuse Road	
Name of Bank, Mailing Address Name of Bank,	Depository, etc. First Citizens Bank 9650 Falls Of Neuse Rd Raleigh CITY STATE Depository, etc. BB&T 6659 Falls of Neuse Road	ZIP CODE

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page _____ **of** _____11___

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
		, 	
=	d Organization, Affiliated Committee, Joint Fu lajority Committee	ndraising Representative	e, or Leadership PAC Spons
Traines Holding IV			
Mailing Address	PO Box 97275		
	Raleigh	NC	27624
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte		oint Fundraising Represent	ative Leadership PAC Spo
Connecte	ed Organization Affiliated Committee		ative Leadership PAC Spo
Connecte Designated Agent: Identi	ed Organization Affiliated Committee		Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee		Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee		Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	Affiliated Committee Affiliated Committee Type of the property of the proper		Leadership PAC Spo
Connecte Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION	Affiliated Committee Affiliated Committee Type of the property of the proper		
Connecte Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION	Affiliated Committee fy by name, address (phone number – optional) CITY CITY	STATE A Telephone Number	ZIP CODE A
Connecte Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION	Affiliated Committee fy by name, address (phone number – optional) CITY CITY ories: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposition afety deposit boxes or make the connected agents.	Affiliated Committee fy by name, address (phone number – optional) CITY CITY ories: List all banks or other depositories in whi	STATE Telephone Number ch the committee deposit	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite tafety deposit boxes or make the safety deposit boxes o	Affiliated Committee fy by name, address (phone number – optional) CITY CITY ories: List all banks or other depositories in white naintains funds. rust Bank	STATE Telephone Number ch the committee deposit	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or make the safety deposit boxes o	Affiliated Committee fy by name, address (phone number – optional) CITY CITY ories: List all banks or other depositories in white anintains funds. rust Bank	STATE Telephone Number ch the committee deposit	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or make the safety deposit boxes o	Affiliated Committee fy by name, address (phone number – optional) CITY CITY ories: List all banks or other depositories in white anintains funds. rust Bank	STATE Telephone Number ch the committee deposit	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page ____ **of** _____11___

(h). Joint Fundraisii	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
Jame of Any Connected	Overnization Affiliated Committee Joint Fu	advaicing Denvescontative	o or Londovskin DAC Spons
Care America	Organization, Affiliated Committee, Joint Fu	idiaising nepresentative	e, or Leadership FAC Spons
Mailing Address	PO Box 30844		
	Bethesda	MD	20824
-	CITY ▲	STATE ▲	ZIP CODE ▲
		oint Fundraising Representa	ative Leadership PAC Sp
Connecte Designated Agent: Identif	d Organization Affiliated Committee	oint Fundraising Representa	ative Leadership PAC Spo
Connecte Connecte Connecte Connecte	d Organization Affiliated Committee	oint Fundraising Representa	Leadership PAC Spo
Connecte Designated Agent: Identif	d Organization Affiliated Committee	oint Fundraising Representa	Leadership PAC Spo
Connecte Designated Agent: Identification Full Name Mailing Address	d Organization Affiliated Committee y by name, address (phone number – optional)		
Connecte Designated Agent: Identification Full Name Mailing Address TITLE OR POSITION	d Organization Affiliated Committee y by name, address (phone number – optional) CITY	STATE A	Leadership PAC Spo
Connecte Designated Agent: Identification Full Name Mailing Address TITLE OR POSITION	d Organization Affiliated Committee y by name, address (phone number – optional)		ZIP CODE A
Connecte Designated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor	d Organization	STATE A Telephone Number	ZIP CODE A
Connecte Designated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposited to the property deposited boxes or make the property of the property deposited boxes or make the property deposited boxes.	d Organization	STATE Telephone Number ch the committee deposit	ZIP CODE A
Connecte Designated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or markets	Affiliated Committee y by name, address (phone number – optional) CITY CITY ories: List all banks or other depositories in while aintains funds.	STATE Telephone Number ch the committee deposit	ZIP CODE A
Connecte Designated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the second process of the second	Affiliated Committee y by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in while aintains funds.	STATE Telephone Number ch the committee deposit	ZIP CODE A
Connecte Designated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the second process of the second	Affiliated Committee y by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in while aintains funds.	STATE Telephone Number ch the committee deposit	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

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5(g)	or(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	С
6.		Organization, Affiliated Committee, Joint Fundra	aising Representative	, or Leadership PAC Sponsor
	Invest in the Futur	re Committee		
	Mailing Address	824 S Milledge Ave Ste 101		
		Athens	GA L	30605
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Affiliated Committee X Joint	Fundraising Representa	tive Leadership PAC Sponsor
8.		by name, address (phone number – optional)		
	Full Name			
	Mailing Address			
	Mailing Address			
	Mailing Address			
	Mailing Address TITLE OR POSITION	CITY A	STATE A	ZIP CODE A
		•		ZIP CODE A
9.	Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in which	STATE ▲ lephone Number	
9.	Banks or Other Depositor safety deposit boxes or man Name of Bank, Depository, etc.	ries: List all banks or other depositories in which sintains funds.	STATE ▲ lephone Number	
9.	Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in which intains funds.	STATE ▲ lephone Number	
9.	Banks or Other Depositor safety deposit boxes or man Name of Bank, Depository, etc.	ries: List all banks or other depositories in which intains funds.	STATE ▲ lephone Number	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraisin	g Participant:			
1.			FEC ID number	C
2.			FEC ID number	С
3.			FEC ID number	С
4.			FEC ID number	С
	Organization, Affiliated Comm		aising Representativ	e, or Leadership PAC Spor
GEORGE HOLDII	NG VICTORY COMMIT	TEE 2018		
	PO BOX 97275			
Mailing Address				
	Raleigh		NC NC	27624
Relationship:	CITY	A	STATE ▲	ZIP CODE ▲
	Organization Affiliated Cor		Fundraising Represent	ative Leadership PAC S
esignated Agent: Identify	Organization Affiliated Cor		Fundraising Represent	ative Leadership PAC S
esignated Agent: Identify			Fundraising Represent	ative Leadership PAC S
esignated Agent: Identify			Fundraising Represent	ative Leadership PAC S
esignated Agent: Identify		nber – optional)		ative Leadership PAC S
esignated Agent: Identify	by name, address (phone num	nber – optional)		
esignated Agent: Identify Full Name	by name, address (phone num	nber – optional)		
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor of the deposite boxes or main arms of Bank,	by name, address (phone num	nber – optional)	STATE A lephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or material depositions, epository, etc.	by name, address (phone num	nber – optional)	STATE A lephone Number	ZIP CODE A
Full Name Mailing Address	by name, address (phone num	nber – optional)	STATE A lephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor dety deposit boxes or material depository, etc.	by name, address (phone num	nber – optional)	STATE A lephone Number	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
STARS AND STI	RIPES AMERICA		
Mailing Address	PO BOX 15239		
	Washington	DC	20003
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Sp
	Affiliated Committee Join Join fy by name, address (phone number – optional)	nt Fundraising Represent	ative Leadership PAC Sp
		nt Fundraising Represent	Leadership PAC Sp
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esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of Bank,	fy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
HOLDING ROUZ	ZER MAJORITY COMMITTEE		
I			
Mailing Address	PO BOX 97275		
	Raleigh	NC	27624
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
	ed Organization Affiliated Committee Join	t Fundraising Represent	ative Leadership PAC Sp
		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
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esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	t Fundraising Represent	
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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1		FEC ID number	С
2		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
=	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
TAKE BACK THE	E HOUSE 2020		
	DO DOV 2004		
Mailing Address	PO BOX 30844		
	BETHESDA	MD MD	20824
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Designated Agent: Identi	y by name, address (phone number – optional)		
	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A	STATE A	ZIP CODE A